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APPLICANTS

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** CONTINUING DATA ***** *non* *Don*** FOREIGN APPLICATIONS ***** *non* *Don*

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 1	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 2
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

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TITLE

Mounting clip for removable protective shields

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